



**Joint County
Gang Prevention Initiative
Community Mobilization and
Outreach Grants for
Year- Round Programs
FY 2007**



Application Cover Sheet

<i>Organization/Agency Name</i>	
<i>Street Address</i>	
<i>City, State, Zip Code</i>	
<i>Telephone Number(s)</i>	
<i>Fax Number(s)</i>	
<i>Executive Director/ CEO</i>	
<i>Contact Person (if other than Executive Director)</i>	
<i>e-mail address</i>	
<i>Website (URL) address for organization</i>	
<i>Total Funding Requested</i>	
<i>Brief Summary of Proposed Project</i>	

Authorized Signature

Signature and Title of Authorized Official

Date



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Project Budget

<i>Organization/Agency Name</i>	
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The following budget information pertains specifically to the project for which your agency/organization is requesting funds. This should not be your organization's total operational budget. Plans and cost estimates for materials and supplies should be attached. Equipment must be delineated by number, type and unit costs, and estimates should be attached.

Expense Category	Requested Grant Funds	Organizational Contribution (if any)	Total Requested funds
Total funding requested			



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Grant Application

Organization/Agency Name	
Proposed Services	<input type="checkbox"/> Prevention and Intervention Services <input type="checkbox"/> Youth Leadership and Development Programs <input type="checkbox"/> Community-wide Outreach/Mobilization Events
Location(s) of Services	<input type="checkbox"/> Montgomery County – please specify location (s) <hr/> <input type="checkbox"/> Prince George's County – please specify location(s) <hr/>
Total Funding Requested	

The following are key elements of the project description. The total length of this response must not exceed seven (7) pages.

- I. Project Summary
- II. Organizational mission, programs and services provided
- III. Describe the organization's offerings in relation to the Joint County gang prevention strategy
- IV. Describe in detail the programs, services and/or activities to be delivered utilizing this funding. Explain the nature and scope of services, and provide specific details regarding how the programs, services and activities contribute to safe and gang-free communities.

Describe involvement of youth in planning, directing proposed programs/services.

- V. Describe the targeted population and the number of participants to be served. Describe your approach to outreach in the community as it relates to at-risk and/or gang-involved youth. Describe your program's role in delivering services to under-served populations, as applicable.
- VI. List and describe anticipated program outcomes. Describe how these outcomes impact and promote safe and gang-free communities.
- VII. Describe the program/project evaluation process, including outcome measures.
- VIII. Discuss how the proposed project will benefit the Joint County gang prevention effort.
- IX. Describe your organization's use of volunteers, if applicable.



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Application Checklist



<i>Name of Organization</i>	
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- A. Cover sheet included?**
- | | | | | | |
|--------------------------------------|-------|-------|-------|--------|--------------|
| Yes | _____ | No | _____ | Page # | _____ |
| 1. Agency address listed? | Yes | _____ | No | _____ | Page # _____ |
| 2. Agency phone number listed? | Yes | _____ | No | _____ | Page # _____ |
| 3. Agency fax number listed? | Yes | _____ | No | _____ | Page # _____ |
| 4. Agency contact person listed? | Yes | _____ | No | _____ | Page # _____ |
| 5. Agency Executive Director listed? | Yes | _____ | No | _____ | Page # _____ |

B. Copies

- | | | | | |
|--|-----|-------|----|-------|
| 1. Twelve separate, individually collated copies of application submitted | Yes | _____ | No | _____ |
| 2. Copy of checklist attached to each copy | Yes | _____ | No | _____ |

C. Location

- | | | | | |
|---|-----|-------|----|-------|
| 1. Is your organization/agency located in Montgomery County? | Yes | _____ | No | _____ |
| 2. Is your organization/agency located in Prince George's County? | Yes | _____ | No | _____ |

D. Project Budget Form?

- | | | | | | | |
|---|-----|-------|----|-------|--------|-------|
| 1. Are dollar amounts consistent with total amount requested? | Yes | _____ | No | _____ | Page # | _____ |
|---|-----|-------|----|-------|--------|-------|

E. Are requested attachments included?

- | | | | | | | |
|---|-----|-------|----|-------|--------|-------|
| 1. Proof of applicant's incorporation status. | Yes | _____ | No | _____ | Page # | _____ |
| 2. Proof of applicant's not for profit status | Yes | _____ | No | _____ | Page# | _____ |
| 3. Certified financial statement for applicants' last complete fiscal year (preferably an audit). | Yes | _____ | No | _____ | Page # | _____ |
| 4. Complete budget for applicant's current fiscal year | Yes | _____ | No | _____ | Page # | _____ |
| 5. Current list of Officers & Board of Directors | Yes | _____ | No | _____ | Page # | _____ |
| 6. Current List of Board Members addresses and telephone numbers | Yes | _____ | No | _____ | Page # | _____ |

F. Application

- | | | | | | | |
|--|-----|-------|----|-------|--------|-------|
| 1. Brief Synopsis | Yes | _____ | No | _____ | Page # | _____ |
| 2. Signature and Date | Yes | _____ | No | _____ | Page # | _____ |
| 3. Mission of agency clearly outlined? | Yes | _____ | No | _____ | Page # | _____ |
| 4. Project Proposal | Yes | _____ | No | _____ | Page # | _____ |
| 5. Project Outcomes? | Yes | _____ | No | _____ | Page # | _____ |
| 6. Evaluation? | Yes | _____ | No | _____ | Page # | _____ |
| 7. Youth Involvement/Leadership | Yes | _____ | No | _____ | Page # | _____ |

I attest that all of the above items/attachments have been included with this grants application. I understand that failure to provide any or all of the above documents will render this application ineligible for consideration.

Signature of Agency Representative

Date